

UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF MISSOURI

Gilbert L. Mobley )  
Plaintiff )  
 )  
vs. )  
Greene County Highway dept )  
Emery Sapp & Sons )  
Defendant )  
 )  
Case No. 22-3007-cv-s-mdh  
22-3307-cv-s-mdh

**APPLICATION FOR LEAVE TO FILE ACTION  
WITHOUT PAYMENT OF FEES  
WITH AFFIDAVIT OF FINANCIAL STATUS IN SUPPORT**

I state that I am unable to pay the fees to file an action against the defendant(s) in this case and that the actions of the defendant(s) have harmed me.

Attached is my Affidavit of Financial Status in support of my application to the court for leave to file a civil action without payment of costs.

Gilbert L. Mobley  
Plaintiff

UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF MISSOURI

Gilbert Louis Mobley  
\_\_\_\_\_  
Plaintiff  
\_\_\_\_\_  
vs.  
\_\_\_\_\_  
Greene County Highway Depart / Emery Sapp  
\_\_\_\_\_  
Defendant  
\_\_\_\_\_  
)

22-3007-CV-MDH  
Case No. 22-3307-CV-MDH

**AFFIDAVIT OF FINANCIAL STATUS**

I, Gilbert L Mobley, declare that I am the plaintiff in this case, that because of my poverty I am unable to pay the costs of these proceedings, and that I believe I am entitled to relief.

I further swear that the responses which I have made to the questions below and the information I have given relating to my ability to pay the costs of commencing and prosecuting this action are true.

**I. MARITAL STATUS AND PERSONAL DATA**

A. Single:  Married:  Separated:  Divorced:

B. Name of Spouse \_\_\_\_\_

C. Age of plaintiff, petitioner or complainant: 67

D. Age of spouse: \_\_\_\_\_

E. Address of plaintiff, petitioner or complainant:

**5110 S Woodfield Place**

Telephone: 417-848-6100

F. Address of spouse: \_\_\_\_\_

Telephone: \_\_\_\_\_

G. State name or names of dependents who live with you, their age, address, relationship, and how much of their monthly support you provide:

## II. EMPLOYMENT

A. Name of employer: Self: Dr. Gil Live Telemedicine

Address of employer: \_\_\_\_\_

Employer's telephone: \_\_\_\_\_ Length of employment: \_\_\_\_\_

Job title or description: \_\_\_\_\_

Net Income: Monthly \$ 2600 Weekly \$ 650

Gross Income: Monthly \$ 3333 Weekly \$ 833

Does employer provide health insurance: Yes  No  \_\_\_\_\_

If employer provides health insurance, describe coverage: \_\_\_\_\_

B. Previous employment (Answer only if presently unemployed).

Name of employer: \_\_\_\_\_

Address of employer: \_\_\_\_\_

Employer's telephone: \_\_\_\_\_ Length of employment: \_\_\_\_\_

Job title or description: \_\_\_\_\_

Net Income: Monthly \$ \_\_\_\_\_ Weekly \$ \_\_\_\_\_

Gross Income: Monthly \$ \_\_\_\_\_ Weekly \$ \_\_\_\_\_

C. Employment of spouse:

Name of employer: \_\_\_\_\_

Address of employer: \_\_\_\_\_

Employer's telephone: \_\_\_\_\_ Length of employment: \_\_\_\_\_

Job title or description: \_\_\_\_\_

Net Income: Monthly \$ \_\_\_\_\_ Weekly \$ \_\_\_\_\_

Gross Income: Monthly \$ \_\_\_\_\_ Weekly \$ \_\_\_\_\_

### III. FINANCIAL STATUS

(Answer questions on behalf of both the plaintiff, petitioner or complainant and spouse).

A. Owner of real property? Yes  No

If yes - Description: My home (fully mortgaged)

Address: 5110 S Woodfield Place

In whose name? Gilbert L Mobley

Estimated value: \$450,000

Total amount owed: 363,281

Owed to: Bank of America

Annual income from property: 2100

B. Owner of automobile: Yes  No

If yes - Number of automobiles owned: 2

Make Ford truck Model f Series Year 1993

Make Winnebago RV Model Sightseer Year 2004

In whose name registered? Gilbert L Mobley

Present value: both: \$5000 total, cumulatively. Neither vehicles are safe or road worthy

Amount owed on the automobile(s): \_\_\_\_\_

Owed to: \_\_\_\_\_

Monthly payment(s): \_\_\_\_\_

C. Cash on hand: (Include checking and savings accounts)

\$ **zero**

List names and addresses of banks and associations:

**Bank of America**

Please do not state account numbers:  
**Two accounts: Dr Gil Live LLC & personal**

D. Have you received within the past 12 months any money from any of the following sources:

	Yes	No
Rent payments, interest or dividends:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Pensions, trust funds, annuities or life insurance payments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Gifts or inheritances?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Welfare payments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
ADC or other governmental child support?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Unemployment benefits?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Social Security benefits?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other sources?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

E. If the answer to any item in D above was "Yes", describe each source of money and state the amount received from each during the past 12 months:  
Roommate paid \$700 monthly for three months last year.

#### IV. OBLIGATIONS

A. Monthly rental on house or apartment: \_\_\_\_\_

B. Monthly mortgage payments on house: mort\$740 +late fees\$600

Amount of equity in house: **zero**

C. Monthly mortgage payments on other properties: \$ \_\_\_\_\_

Amount of equity in other properties: \$ \_\_\_\_\_

D. Household expenses:

Monthly grocery expense: 450

Monthly utilities:

Gas: 220

Electric: 250

Water: 20

Other: (Specify) Internet/home phone \$160

E. Other debts and miscellaneous monthly expenses:

TO WHOM OWED AND FOR WHAT REASON INCURRED?	MONTHLY PAYMENTS	BALANCE DUE
Cardinal roofing	unable to pay	\$25,000
Back taxes IRS "seriously delinquent" 2019	unable to pay	137,506
Bank of America penalties and fees	unable to pay	90,721
Woodfield Water works	unable to pay	\$2800
Home repairs/maintenance/upkeep		\$1000
Reppublic Services Trash	unable to pay	\$300

**V. OTHER INFORMATION PERTINENT TO FINANCIAL STATUS**

(Include information regarding stocks, bonds, savings bonds, either individually or jointly owned).

My 50 year home is in need of repairs. I intend to get it marketable ASAP and sell this spring to pay off my debts. I plan to live on my RV.

Prior to last year I was able to do the majority of upkeep. Orthopedic injuries last year and a new one this week will prevent me from these chores, which frankly I adore and enjoy. Contract labor is a prition of the above \$1000

I have a booth at Relic's Antique Mall to start selling my furniture starting last month; no sales yet. Staff is suggesting prices.

I have been unable to pay my mortgage for over two years due to financial constraints.

I understand that a false statement or answer to any question in this affidavit will subject me to penalties of perjury.

Millat Z. Mobley  
Signature of Plaintiff

## VERIFICATION

State of Missouri )  
County of Greene )

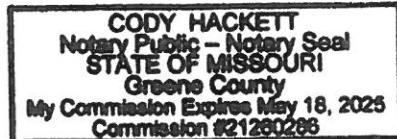
I, being first duly sworn under oath, state that I know the contents of this affidavit and that the information contained in the affidavit is true to the best of my knowledge and belief.

Millat Z. Mobley  
Signature of Plaintiff or Plaintiffs

**All parties must verify**

SUBSCRIBED AND SWORN TO before me this 7<sup>th</sup> day of January, 20 22

Cody Hackett  
Notary Public



May 18<sup>th</sup>, 2025  
My Commission Expires